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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Francine First name M. Middle name Riley Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Francine M. Cherven	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0828	

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Case number (if known)

Debtor 1 Francine M. Riley

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 1422 Frederick Street Joliet, IL 60435 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Will County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Francine M. Riley

Part	2: Tell the Court About	Your B	ankruptcy Ca	ise						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ C	hapter 7							
		□с	hapter 11							
		□с	hapter 12							
		□с	hapter 13							
8.	How you will pay the fee		about how yo	ill pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more detain out how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone ler. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with respirated address.						
					stallments. If you choots (Official Form 103A		nd attach the Application for	Individuals to Pay		
							ou are filing for Chapter 7. By			
			applies to you	ur family size a	ind you are unable to p	pay the fee in installme	e is less than 150% of the off ents). If you choose this optic	n, you must fill out		
			the Application	on to Have the	Chapter 7 Filing Fee \	Waived (Official Form	103B) and file it with your per	tition.		
9.	Have you filed for bankruptcy within the	■ No								
	last 8 years?	☐ Ye	es.							
			District		Whe	-				
			District		Whe		Case number			
			District		Whe	n	Case number			
10.	Are any bankruptcy	■ No								
	cases pending or being filed by a spouse who is	□ Ye								
	not filling this case with you, or by a business partner, or by an affiliate?									
			Debtor				Relationship to you			
			District		Whe	n	Case number, if known			
			Debtor				Relationship to you			
			District		Whe	n	Case number, if known			
11.	Do you rent your residence?	■ No	Go to I	ine 12.						
	. John College	□Ye	es. Has yo	ur landlord ob	tained an eviction judg	ment against you and	do you want to stay in your	residence?		
				No. Go to line	e 12.					
				Yes. Fill out II bankruptcy pe		an Eviction Judgment	Against You (Form 101A) ar	nd file it with this		

Deb	otor 1	Case 16-3	. 8088 i	Doc 1	Filed 11/18/16 Document	Entered 11/18/16 14:45:00 Page 4 of 53 Case number (if known)	Desc Main
Par	t 3:	Report About Any Bus	sinesses Yo	u Own as	s a Sole Proprietor		
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to Pa	art 4.		
			☐ Yes.	Name ar	nd location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,			Name of	business, if any		
	partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			,	Street, City, State & ZIP		
				□ +	Health Care Business (as	defined in 11 U.S.C. § 101(27A))	
					Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
					Stockbroker (as defined in	11 U.S.C. § 101(53A))	
					Commodity Broker (as def	ined in 11 U.S.C. § 101(6))	
					None of the above		
13.	Chap Bank	rou filing under oter 11 of the rruptcy Code and are a small business or?	deadlines. I	f you indic cash-flow	btor so that it can set appropriate ecent balance sheet, statement of do not exist, follow the procedure		
	For a	definition of small	■ No.	I am not	filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).		□ No.	I am filin	g under Chapter 11, but I	am NOT a small business debtor according to	o the definition in the Bankruptcy
			☐ Yes.	I am filin	g under Chapter 11 and I	am a small business debtor according to the	definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Francine M. Riley Debtor 1

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 Francine M. Riley Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Francine M. Riley Signature of Debtor 2 Francine M. Riley Signature of Debtor 1 Executed on November 18, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Francine M. Riley Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Marc C.	Scheinbaum	Date	November 18, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Marc C. So	heinbaum			
Scheinbau Firm name	m & West, LLC			
P. O. Box Vernon Hil	5009 ls, IL 60061-5009			
Number, Street,	City, State & ZIP Code			
Contact phone	815-636-4676	Email address	amerlincat@aol.com	
6180394	-4-			
Bar number & St	are			

		17(1(1)))	III FAUE O ULDO	
Fill in this infor	mation to identify your	case:		
Debtor 1	Francine M. Riley	1		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,050.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,050.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,920.00
	Your total liabilities	\$	49,920.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,872.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,914.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Francine M. Riley

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 3,790.00 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	ıim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	С	ase 16-36808 Do		11/18/16 ument	Entered 11/18/1 Page 10 of 53	6 14:45:00	Desc	Main
Fill	in this info	rmation to identify your ca						
Deb	otor 1	Francine M. Riley	Middle Name		Last Name			
	otor 2 buse, if filing)	First Name	Middle Name		Last Name			
Uni	ted States B	ankruptcy Court for the: N	ORTHERN DISTI	RICT OF ILLI	NOIS			
Cas	se number				_			Check if this is an amended filing
_		orm 106A/B le A/B: Prope	rty					12/15
hink nfor nsv	t it fits best. mation. If mo		as possible. If two eparate sheet to th	married people nis form. On th	e are filing together, both are e top of any additional pages,	equally responsible	e for supp	lying correct
		e Each Residence, Building, La						
	_	have any legal or equitable in	terest in any resid	ence, building,	, land, or similar property?			
	No. Go to Pa							
	Yes. Where	is the property?						
1.1			What	is the property	? Check all that apply			
	NONE Street address, if available, or other description			•	home ti-unit building or cooperative	the amount of any	cured claims or exemptions. Put y secured claims on Schedule D: ave Claims Secured by Property.	
				Land	or mobile home	Current value of entire property?	ŗ	Current value of the portion you own?
	City	State ZIP	Code	Investment pro	operty		0.00	\$0.00
				Other				r ownership interest by by the entireties, or
			Who	has an interest Debtor 1 only	t in the property? Check one	a life estate), if ki	iown.	
				Debtor 2 only				
	County			Debtor 1 and	•	☐ Check if this	is commı	ınity property
					f the debtors and another ou wish to add about this iten on number:	(see instructions	s)	
2.		llar value of the portion yo			from Part 1, including any	entries for		\$0.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

page 1 Official Form 106A/B Schedule A/B: Property

Part 2: Describe Your Vehicles

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Deb	tor 1	Francine M. Riley			Ca	ase number (if known)	
3. C	ars, var	ns, trucks, tractors, spo	rt utility vehic	cles, motorcycles			
	No						
	Yes						
3.1	Make	: VW		Who has an interest in the	e property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Mode			Debtor 1 only			ve Claims Secured by Property.
	Year:			Debtor 2 only		Current value of t	
		oximate mileage: r information:		☐ Debtor 1 and Debtor 2 of ☐ At least one of the debtor	•	entire property?	portion you own?
	011101	i intermedient		At least one of the debt	ors and another		
				Check if this is comme (see instructions)	unity property	\$3,000	.00 \$3,000.00
5 A		dollar value of the porti ou have attached for Pa					\$3,000.00
Part	3: Des	scribe Your Personal and H	lousehold Item	s			
Doy	you ow	n or have any legal or e	quitable inter	est in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xample No	old goods and furnishings: Major appliances, furni		hina, kitchenware			
	Yes.	Describe					
		4 beds		tchen set, kitchen ap	ppliances, 2 t.v.s, 2		\$1,000.0
E	No				oment; computers, printe	rs, scanners; music co	ollections; electronic devices
E	Example -	oles of value es: Antiques and figurines other collections, mem			oks, pictures, or other art	t objects; stamp, coin,	or baseball card collections;
	No Yes.	Describe					
<i>E</i>	xample	ent for sports and hobbi es: Sports, photographic, musical instruments		other hobby equipment;	bicycles, pool tables, gol	f clubs, skis; canoes a	and kayaks; carpentry tools;
	No Yes.	Describe					
	Firearm Exampl	n s <i>les:</i> Pistols, rifles, shotgur	ns, ammunitio	n, and related equipmen	t		
	No	Describe					

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Case number (if known) Document Debtor 1 Francine M. Riley 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$600.00 women's and children's clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... costume jewelry \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,750.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$100.00 cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... checking and **PNC Bank** \$250.00 17.1. savings **Chase Bank** \$200.00 checking 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

	Case 16-36808	Doc 1	Document	Page 13 of 53	3/16 14:45:00	Desc Main
Debtor 1	Francine M. Riley		Document		case number (if known)	
☐ Yes	s. Give specific information al Name	bout them e of entity:			% of ownership:	
Nego Non-	rnment and corporate bond otiable instruments include pe enegotiable instruments are th	rsonal checks	s, cashiers' checks, pror	nissory notes, and mor	ney orders.	
■ No □ Yes	s. Give specific information ab	oout them er name:				
	ement or pension accounts mples: Interests in IRA, ERISA		(k), 403(b), thrift saving	s accounts, or other pe	nsion or profit-sharing p	olans
☐ Yes	s. List each account separatel Type of	y. account:	Institution n	ame:		
Your	rity deposits and prepayme share of all unused deposits mples: Agreements with landlo	you have ma				ies, or others
■ Yes	3		Institution n	ame or individual:		
			security o	leposit		\$1,250.00
■ No □ Yes 24. Intere 26 U.S ■ No □ Yes 25. Trust ■ No □ Yes 26. Pater Exar ■ No □ Yes 27. Licer Exar ■ No □ Yes	Issuer name Issuer name Issuer name Issuer name Issts in an education IRA, in a Issuer name Iss. Sy 530(b)(1), 529A(b), ar Institution na Iss, equitable or future intere Is. Give specific information al Ints, copyrights, trademarks, Inples: Internet domain names Is. Give specific information al Isses, franchises, and other in Inples: Building permits, exclusions. Is Give specific information al Isses, franchises, and other in Inples: Building permits, exclusions. Is Give specific information al Isses, franchises, and other in Inples: Building permits, exclusions. Is Give specific information al Isses of the specific information al I	and description and account in the first secretary of the first secr	on. n a qualified ABLE pro ription. Separately file the rty (other than anythin ts, and other intellecturoceeds from royalties a	egram, or under a qua ne records of any intere g listed in line 1), and al property nd licensing agreemen	lified state tuition prog sts.11 U.S.C. § 521(c): rights or powers exer	rcisable for your benefit
woney o	n property owed to you?					portion you own? Do not deduct secured claims or exemptions.
□ No	efunds owed to you s. Give specific information ab	oout them, inc	luding whether you alre	ady filed the returns an	d the tax years	
		antic	ipated 2016 IRS tax	refund		\$3,500.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ No

	Case 10-308	Document	Page 14 of 53	Desc Main
Debtor 1	Francine M. Rile	<u> </u>	Case number (if known)	
☐ Yes	s. Give specific informat	on		
Exan		sability insurance payments, disability boans you made to someone else	enefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	ests in insurance polic poles: Health, disability,		t (HSA); credit, homeowner's, or renter's insurar	nce
	s. Name the insurance o	ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		term life insurance thru work wit cash value.	h no	\$0.00
No N	mples: Accidents, emplo s. Describe each claim.	s, whether or not you have filed a laws yment disputes, insurance claims, or rig uidated claims of every nature, includ		set off claims
		whiplash type injuries.	She is currently suing and is ; Jamboris & Schwartz; attorney	Unknown
			nd automobile accident on or was not injured and is not suing.	\$0.00
■ No	inancial assets you di	·		
		of your entries from Part 4, including	any entries for pages you have attached	\$5,300.00
Part 5: D	Describe Any Business-Ro	elated Property You Own or Have an Intere	st In. List any real estate in Part 1.	
37. Do vo i	u own or have anv legal o	r equitable interest in any business-related	i property?	
	Go to Part 6.		,	
☐ Yes.	Go to line 38.			

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Case number (if known) Document Debtor 1 Francine M. Riley Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$3.000.00 57. Part 3: Total personal and household items, line 15 \$1,750.00 Part 4: Total financial assets, line 36 \$5,300.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$10,050.00 \$10,050.00 Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$10,050.00

		17000000	III FAUE IU UI J	1.)
Fill in this infor	rmation to identify your	case:		
Debtor 1	Francine M. Riley	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this i amended filin

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$3,000.00		\$2,400.00	735 ILCS 5/12-1001(c)	
		100% of fair market value, up to any applicable statutory limit		
\$600.00		\$600.00	735 ILCS 5/12-1001(a)	
		100% of fair market value, up to any applicable statutory limit		
\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$250.00		\$250.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$3,000.00 \$100.00 \$250.00	\$3,000.00	\$3,000.00 \$3,000.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$250.00 \$250.00 \$200.00 \$200.00 \$100% of fair market value, up to any applicable statutory limit	

Case 16-36808 Doc 1 Filed 11/18/16 Entered 11/18/16 14:45:00 Desc Main Document Page 17 of 53 Debtor 1 Francine M. Riley Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B anticipated 2016 IRS tax refund 735 ILCS 5/12-1001(b) \$3,500.00 \$3,450.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Debtor was involved in an 735 ILCS 5/12-1001(h)(4) Unknown \$15,000.00 automobile accident on 8/17/2015 when she was hit by a truck. 100% of fair market value, up to Suffered burns on arm and whiplash any applicable statutory limit

3.	and in Jamb	and is represented by Kralovec, Jamboris & Schwartz; attorney Michael Shinsky; 312-782-2525. Line from Schedule A/B: 34.1				
	(Subje		claiming a homestead exemption of more than \$160,375? o adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)			
	□ Y	es.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?			
			No			
			Yes			

Fill in this infor					
Debtor 1	Francine M. Riley	1			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					D. Observativity in the second
(II KHOWH)					☐ Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Document	Page 19 of 53	
Fill in this	information to identify your c	ase:		
Debtor 1	Francine M. Riley			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF II	LLINOIS	
000	atoo Danii aptoy Gourt or ano.			
Case num (if known)	ber			☐ Check if this is an amended filing
	Form 106E/F ule E/F: Creditors W	ho Have Unsecured	d Claims	12/15
any executo Schedule G Schedule D left. Attach	ory contracts or unexpired leases t : Executory Contracts and Unexpi : Creditors Who Have Claims Secu	that could result in a claim. Also red Leases (Official Form 106G). Ired by Property. If more space is a. If you have no information to re	ITY claims and Part 2 for creditors with NONI blist executory contracts on Schedule A/B: P Do not include any creditors with partially so s needed, copy the Part you need, fill it out, n eport in a Part, do not file that Part. On the to	roperty (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the
	r creditors have priority unsecured			
■ No.	Go to Part 2.			
☐ Yes	i.			
Part 2:	List All of Your NONPRIORITY	Y Unsecured Claims		
3. Do any	creditors have nonpriority unsec	ured claims against you?		
□ No.	You have nothing to report in this pa	art. Submit this form to the court wit	h your other schedules.	
Yes	i.			
unsecu	red claim, list the creditor separately	for each claim. For each claim liste	the creditor who holds each claim. If a creditored, identify what type of claim it is. Do not list clau have more than three nonpriority unsecured claus	ims already included in Part 1. If more
				Total claim
	ssociated Radiologists of	Joliet Last 4 digits of ac	count number XXXX	\$600.00
c/	onpriority Creditor's Name On Creditors Collection Bure On Box 63	eau Inc When was the del	bt incurred?	
Nu	ankakee, IL 60901-0063 umber Street City State Zlp Code ho incurred the debt? Check one.	As of the date you	u file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and ano	ther Type of NONPRIO	ORITY unsecured claim:	
	Check if this claim is for a comm			
	ebt the claim subject to offset?	Obligations aris	sing out of a separation agreement or divorce that aims	at you did not
_	No		on or profit-sharing plans, and other similar debts	S
	Yes	Other. Specify	medical services	

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Debtor 1 Francine M. Riley Case number (if know) 4.2 \$850.00 **Credit One Bank** Last 4 digits of account number 7021 Nonpriority Creditor's Name c/o LVNV Funding, LLC When was the debt incurred? P O Box 10497 Greenville, SC 29603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes 4.3 D & E Finance Last 4 digits of account number unty \$11,000.00 Nonpriority Creditor's Name c/o Markoff Law. LLC When was the debt incurred? 29 N. Wacker Dr., # 550 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes automobile repossession Other. Specify 4.4 **EMP of Will County, LLC** \$100.00 Last 4 digits of account number 6385 Nonpriority Creditor's Name P O Box 14099 When was the debt incurred? Belfast, ME 04915 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services ☐ Yes

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Debtor 1 Francine M. Riley Case number (if know) 4.5 **Express - Comenity Bank** \$860.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes 4.6 **Illinois Tollway Authority** Last 4 digits of account number 1759 \$220.00 Nonpriority Creditor's Name c/o Arnold Scott Harris. PC When was the debt incurred? 111 West Jackson Blvd, suite 600 Chicago, IL 60604-4135 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify tollway fines ☐ Yes 4.7 Last 4 digits of account number \$40.00 Joliet Radiological Service Corp 3946 Nonpriority Creditor's Name 36910 Treasury Center When was the debt incurred? Chicago, IL 60694-6900 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services

☐ Yes

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Debit	Francine M. Riley	Case number (if know)	
4.8	Joliet Radiological Service Corp	Last 4 digits of account number 3946	\$0.00
	Nonpriority Creditor's Name c/o ATG Credit, LLC P O Box 14895	When was the debt incurred?	
	Chicago, IL 60614-4895 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify notice only	
4.9	Kay Jewelers / Sterling Jewelers Nonpriority Creditor's Name	Last 4 digits of account number 4xxx	\$0.00
	375 Ghent Road Fairlawn, OH 44333-4601	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify notice only	
4.1	NELNET	Last 4 digits of account number XXXX	\$8,000.00
0	Nonpriority Creditor's Name	Last 4 digits of account number XXXX	ΨΟ,ΟΟΟ.ΟΟ
	121 S. 13th Street	When was the debt incurred?	
	Lincoln, NE 68508 Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify guaranteed student loan	
		Curior, Opolony U	

Document Page 23 of 53 Debtor 1 Francine M. Riley Case number (if know) 4.1 New York & Co / Comenity \$150.00 XXXX Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? P.O. Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card 4.1 **Nicor Gas** 0828 \$1,500.00 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 5407 When was the debt incurred? Carol Stream, IL 60197-5407 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify for service at 907 Prairie, Joliet, IL ☐ Yes 4.1 Office of the Secretary of State 8755 \$0.00 3 Last 4 digits of account number Nonpriority Creditor's Name **Dept of Administration Hearings** When was the debt incurred? Room 212, Howlett Building Springfield, IL 62756 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

Official Form 106 E/F

■ No

☐ Yes

report as priority claims

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

file #: 201400259684

registration #: \$789136 2014

notice only

Is the claim subject to offset?

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Case number (if know)

Debtor	1 Francine M. Riley	Case number (if know)	
4.1	Presence Saint Joseph Medical Cente	Last 4 digits of account number Various	\$2,000.00
	Nonpriority Creditor's Name Patient Financial Services 1643 Lewis Ave., suite 203 Billings, MT 59102-4151	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical services	
4.1	Presence Saint Joseph Medical Cente Nonpriority Creditor's Name	Last 4 digits of account number 2055	\$0.00
	333 N. Madison Joliet, IL 60435	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify notice only	
4.1	Providian / LVNV Funding	Last 4 digits of account number 3295	\$3,100.00
	Nonpriority Creditor's Name c/o Financial Recovery Services P O Box 385908	When was the debt incurred?	
	Minneapolis, MN 55438-5908 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	

Document Page 25 of 53 Debtor 1 Francine M. Riley Case number (if know) 4.1 Safety and Financial Responsibility 8755 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 2701 South Dirksen Parkway When was the debt incurred? Springfield, IL 62723 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts suspended driver's license ticket / case # 8454581 file #: 201400259684 ☐ Yes Other. Specify regist #: S789136 2014 4.1 Security Finance Company of Illinoi 0828 \$1,300.00 Last 4 digits of account number Nonpriority Creditor's Name P O Box 3146 When was the debt incurred? Spartanburg, SC 29304-3146 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify unsecured loan 4.1 State Farm - Birmingham - auto 2359 \$7,600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o Vengroff Williams, Inc P O Box 4155 Sarasota, FL 34230-4155 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

☐ Yes

■ No

debt

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify automobile accident

☐ Student loans

report as priority claims

Best Case Bankruptcy

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 26 of 53 Debtor 1 Francine M. Riley Case number (if know) 4.2 \$7,600.00 State Farm Insurance Co. / Katchika 9513 Last 4 digits of account number 0 Nonpriority Creditor's Name c/o National Service Bureau, Inc When was the debt incurred? 18912 North Creek Pkwy, # 205 Bothell, WA 98011 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts auto accident with John M Katchika con Other. Specify ☐ Yes 9/24/2014 4.2 6959 \$4,500.00 **Turner Acceptance** Last 4 digits of account number Nonpriority Creditor's Name 5900 W. Howard Street When was the debt incurred? Skokie, IL 60077 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify automobile repossession ☐ Yes 4.2 Turner Acceptance - 2 6959 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name c/o J.V.D.B. & Associates When was the debt incurred? P O Box 5718 Elgin, IL 60121-5718 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify notice only

	Case 10-30808 DUC 1	Filed 11/18/10 Efficied 11/18/10 14.45.00 Desc M	alli	
Debto	r 1 Francine M. Riley	Document Page 27 of 53 Case number (if know)		
4.2	Victoria's Secret - Comenity Bank	Last 4 digits of account number XXXX	\$250.00	
	Nonpriority Creditor's Name attn: Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify credit card		
4.2	World Finance Corporation	Last 4 digits of account number 0828	\$150.00	
	Nonpriority Creditor's Name 108 Frederick Street Greenville, SC 29607-2532	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	□ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify unsecured loan		
4.2	Votin Chah MD	0004	¢400.00	
5	Yatin Shah, MD Nonpriority Creditor's Name	Last 4 digits of account number 0904	\$100.00	
	2025 S. Chicago Street 60436	When was the debt incurred?		
	Joliet, IL 60436 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify medical services

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

report as priority claims

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Case number (if know)

Trancine W. Kiley			
Name and Address Credit One Bank / Visa P.O. Box 98873	On which entry in Part 1 or Part Line 4.2 of (<i>Check one</i>):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Las Vegas, NV 89193-8873	Last 4 digits of account number	• ,	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
Credit One Bank / Visa	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
c/o J.C. Christensen P O Box 519 Sauk Rapids, MN 56379		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Sauk Rapius, Min 30379	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
Kay Jewelers / Sterling Jewelers	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 3680 Akron, OH 44309		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	•	Total Claim
Total claims	OI.	ottuent toans	OI.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	49,920.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	49,920.00

Fill in this infor				
Debtor 1	Francine M. Riley	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended filir

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rhom you have the contract or lease street, City, State and ZIP Code	State what the contract or lease is for
2.1 Mr and Mrs Riley Joliet, IL 60435		Debtor lives with parents and will continue to pay monthly rent. No written lease.

		Docume	ent Page 30 o	of 53	
Fill in this	s information to identify you	ır case:			
Debtor 1	Francisco M. Dile				
Deplor	Francine M. Rile	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
United St	ates bankruptcy Court for the.	. NORTHLAN DISTAICT	OI ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
O((;	15 40011				
Officia	al Form 106H				
Sched	dule H: Your Co	debtors			12/15
our name	e and case number (if know	n). Answer every question			p of any Additional Pages, write
1. Do	you have any codebtors? (If you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No)				
□Ye	es .				
					ty states and territories include
Alizo	na, California, Idaho, Louisian	ia, Nevada, New Mexico, Pu	erio Rico, Texas, wasi	lington, and wisconsin.)
■ No	o. Go to line 3.				
`	es. Did your spouse, former sp	ouse, or legal equivalent live	e with you at the time?		
	o. D.a your opouco, ronner op	ouco, or rogal equitations in t	o man you at the time.		
in lin Form	e 2 again as a codebtor only	y if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The cr	editor to whom you owe the debt
	Name, Number, Street, City, State and	I ZIP Code		Check all schedul	es that apply:
2.4				Польчил в г	
3.1	Name			Schedule D, lir	
				☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		
3.2				Cobodula D. III	20
3.2	Name			Schedule D, lir	
				☐ Schedule E/F,	
				☐ Schedule G, lir	ıe
	Number Street	Ctata	710.0-1-		
	City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:							
	otor 1 Francine M.								
	otor 2 puse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_				
(If kr	fficial Form 106l					13 income	ed filing ent showing postr as of the following		
	chedule I: Your Inc	ome				MM / DD/ Y	YYY	12/15	
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment**	are married and not filing wi	ng jointly, and your s th you, do not includ	pouse i le inforr	s living w nation ab	vith you, included in the point your spoot your spoot your spoot in the point in th	ude information ouse. If more sp	about your ace is needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing sp	oouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			•	☐ Employed		
	information about additional employers.		☐ Not employed			☐ Not employed			
	Include part-time, seasonal, or	Occupation	assistant manag	er		_			
	self-employed work.	Employer's name	Brighton Collect	ibles					
	Occupation may include student or homemaker, if it applies.	Employer's address	251 Long Lane La Puente, CA 9	1746					
		How long employed to	here? 2 years						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for a	any line, v	write \$0 in the	space. Include y	our non-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mployers	for that perso	on on the lines be	low. If you need	
					For	Debtor 1	For Debtor 2 non-filing spo		
2.	List monthly gross wages, sala deductions). If not paid monthly,	ry, and commissions (becalculate what the monthle	efore all payroll y wage would be.	2.	\$	3,467.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

3,467.00

N/A

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Deb	otor 1	Francine M. Riley	-	(Case	number (if kr	nown)	_					
					For	Debtor 1				Debtor -filing s		:e	
	Cop	y line 4 here	4.		\$	3,467	7.00		\$	illing 5	•	/A	
5.	List	all payroll deductions:											
٠.	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	585	5.00	1	\$		N	l/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	_	\$			/ <u>A</u>	
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	_	\$			/A	
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	_	\$			/A	
	5e.	Insurance	5e	€.	\$		0.00	_	\$			/A	
	5f.	Domestic support obligations	5f.		\$	(0.00	-	\$		N	l/A	
	5g.	Union dues	50	j.	\$	(0.00	_	\$		N	l/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	(0.00	+	\$		N	/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	945	5.00		\$		N	/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,522	2.00		\$		N	/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	2	\$				\$		N	I/A	
	8b.	Interest and dividends	8b		\$ -		0.00 0.00		\$ —			/A	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c 8c	d.	\$_ \$_	(0.00		\$ \$		N	I/A I/A	
	8e.	Social Security	86	€.	\$_	(0.00	_	\$		N	/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8f. 8g	g.	\$_ \$_	(0.00		\$ \$		N	/A /A	
	8h.	Other monthly income. Specify:	_ 01	ո.+	\$_		0.00	- +	, * _		N	/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$	350	0.00		\$_		!	N/A	
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		2,872.00	+ 9			N/A	= \$		2.872.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				_,010				14,7 (L		_,01 _100
11.	Inclu othe Do r	the all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					,			e J. +\$		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies								12.	\$_		2,872.00
40	_		•								Com		ed income
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes Explain:	(

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify	your case:					
Deb	otor 1 Francine N	/I. Riley			Che	ck if this is:	
	otor 2 ouse, if filing)					An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for	the: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Cas	se numbe r						
	nown)						
O	fficial Form 106	<u> </u>					
S	chedule J: You	Exper	ises				12/15
info	as complete and accurate ormation. If more space is mber (if known). Answer e	needed, atta	ch another sheet to this	e filing together, b form. On the top of	oth are equ f any additi	ially responsible fo onal pages, write y	or supplying correct your name and case
Par		sehold					
1.	Is this a joint case? ■ No. Go to line 2.						
	Yes. Does Debtor 2 liv	e in a separ	ate household?				
	□ No	•					
	☐ Yes. Debtor 2 n	nust file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	otor 2.	
2.	Do you have dependents	? 🗆 No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			3 children		18, 14, 10	■ Yes
							□ No □ Yes
							□ No
							☐ Yes
							□ No
_	_					_	☐ Yes
3.	Do your expenses include expenses of people other yourself and your depen	r than	No Yes				
	t 2: Estimate Your Ong						
exp	imate your expenses as of penses as of a date after th plicable date.						
the	lude expenses paid for wit					Your exp	oneae
(Of	ficial Form 106l.)					Tour exp	C115C5
4.	The rental or home owner payments and any rent for		nses for your residence. In or lot.	nclude first mortgag	e 4. \$.	800.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowne				4b. \$		0.00
	4c. Home maintenance,				4c. \$	·	0.00
5.	4d. Homeowner's associ		dominium dues our residence. such as ho	me equity loans	4d. 5	·	0.00

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Debtor 1	Francine M. Riley	Case num	nber (if known)	
6. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	180.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		100.00
6d.	Other. Specify: cell telephones	6d.		200.00
	d and housekeeping supplies		\$	650.00
	dcare and children's education costs	8.	·	250.00
	thing, laundry, and dry cleaning	9.	·	140.00
	sonal care products and services	10.	· -	30.00
	lical and dental expenses	11.		
	•	11.	Ψ	100.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	120.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	ritable contributions and religious donations	14.	· —	0.00
5. Ins u	<u> </u>	14.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	50.00
		15d.	*	
	Other insurance. Specify:	13u.	Φ	0.00
o. raxe Spe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	¢	0.00
		10.	Φ	0.00
	allment or lease payments:	170	¢	0.00
	Car payments for Vehicle 1	17a. 17b.	· -	0.00
	Car payments for Vehicle 2			0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	¢	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.		
	er payments you make to support others who do not live with you.		\$	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			2.22
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	· <u> </u>	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.		0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
1. Oth	er: Specify: student loan	21.	+\$	94.00
auto	omobile maintenance		+\$	200.00
	culate your monthly expenses			0.04 / 00
	Add lines 4 through 21.		\$	2,914.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,914.00
	sulate very monthly not in one			,
	culate your monthly net income.	00	Φ.	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,872.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,914.00
23c.	Subtract your monthly expenses from your monthly income.	230	\$	-42.00
	The result is your monthly net income.	23c.	Ψ	- 7 2.00
4 Da -	you expect on increase or degrees in your expenses within the way offer w	ou file 4b!	o form?	
	you expect an increase or decrease in your expenses within the year after your expenses within the year after your expenses within the year or do you expect you			e or decrease because of a
	fication to the terms of your mortgage?	i illoriyaye	payment to increas	o or acorease because of a
■ N	, 5 5			
ΠY	'es. Explain here:			

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Fill in this inform	nation to identify your	C350:			
Debtor 1					
Debior	Francine M. Riley	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					☐ Check if this is an amended filing
Official Form					
Declarat	ion About a	an Individua	I Debtor's Sc	hedules	12/15
obtaining money years, or both. 18		n connection with a ban			tement, concealing property, or 00, or imprisonment for up to 20
Did you pay	y or agree to pay some	eone who is NOT an atto	orney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	ity of perjury, I declare true and correct.	that I have read the sur	nmary and schedules file	d with this declarati	on and
X /s/ Fran	ncine M. Riley		X		
	ne M. Riley re of Debtor 1		Signature of	Debtor 2	

Date

Date **November 18, 2016**

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Fill in	this information	on to identify you	r case:			
Debto		Francine M. Rile First Name	Middle Name	Last Name		
Debto	r 2					
(Spouse	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bankru	ptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	number					
(if know	n)					Check if this is an
					a	mended filing
Ott:	aial Farma	107				
	cial Form		Affaina fan Indiaid	luala Filina fan D		
			Affairs for Individ			4/16
					equally responsible for sup additional pages, write you	
		Inswer every que			, audinionai pagoo, iiino jo	
Part 1	Give Deta	ils About Your Ma	arital Status and Where You	Lived Before		
1. W	/hat is vour cu	rrent marital statu	ıs?			
_	_					
	MarriedNot married					
_	• Not mamed					
2. D	uring the last	3 years, have you	lived anywhere other than	where you live now?		
] No					
	Yes. List all	of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
[Debtor 1 Prior	Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
			lived there	_		lived there
	104 Grover S Joliet, IL 6043		From-To: 2 years.	☐ Same as Debtor		☐ Same as Debtor 1 From-To:
	, 00 10		•			
					ity property state or territor ico, Texas, Washington and V	
	Yes. Make s	sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Explain th	e Sources of You	r Income			
4. D Fi	id you have an	ny income from en		all businesses, including part-		ndar years?
] No					
	Yes. Fill in t	he details.				
			Debtor 1		Dobtor 2	
			Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	January 1 of cate you filed fo	current year until or bankruptcy:	■ Wages, commissions, bonuses, tips	\$33,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		s income re deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips		\$36,000.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business			☐ Operating a b	ousiness	
		dar year be December		■ Wages, commissions, bonuses, tips		\$32,000.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business			☐ Operating a b	ousiness	
5.	Include include and other winnings. List each s	come regard public benef If you are fili	less of wheth it payments; ng a joint cas he gross inco	e during this year or the two er that income is taxable. Expensions; rental income; into e and you have income that the from each source separ	xamples o erest; divic t you recei	f other income are a lends; money collect ved together, list it o	ted from lawsuits; r nly once under De	oyalties; an btor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each	s income from source e deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)
		/ 1 of currer filed for ban	nt year until kruptcy:	Child Support		\$3,200.00			
	r last calen nuary 1 to	dar year: December	31, 2015)	Child Support		\$3,800.00			
		dar year bet December		Child Support		\$3,800.00			
P ai		Debtor 1's Neither De	or Debtor 2' ebtor 1 nor Derimarily for a	Made Before You Filed for s debts primarily consum- tebtor 2 has primarily cons personal, family, or househ	er debts? sumer del	ots. Consumer debts			1(8) as "incurred by an
		During the No.	Go to line 7	re you filed for bankruptcy, on the control of the					he total amount you
			paid that cre not include	editor. Do not include payments to an attorney for on 4/01/19 and every 3 years	ents for do this bankr	mestic support oblig uptcy case.	ations, such as chi	ld support a	and alimony. Also, do
	■ Yes.	Debtor 1 c	r Debtor 2 o	r both have primarily cons	sumer dek	ots.		aajaaamam	·
		_	•		aia you pa	y arry orcanor a tota	ror quod or more.		
		■ No. □ Yes	include pay	each creditor to whom you pa ments for domestic support this bankruptcy case.					
	Creditor'	s Name and	l Address	Dates of paym	nent	Total amount paid	Amount you still owe	Was this	payment for

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Debto	or 1	Francine M. Riley	Document	Cas	se number (if known		
<i>Ir</i> of a	nside f whic	n 1 year before you filed for bankruptors include your relatives; any general parch you are an officer, director, person in oness you operate as a sole proprietor. 11 by.	tners; relatives of any ge control, or owner of 20%	neral partners; partners or more of their voting	erships of which y g securities; and a	ou are a gener any managing a	al partner; corporations agent, including one for
	_	No 'es. List all payments to an insider.					
I	nsid	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
ir	nside nclud	n 1 year before you filed for bankruptcer? e payments on debts guaranteed or cosi		yments or transfer a	any property on a	account of a d	ebt that benefited an
	_	es. List all payments to an insider					
ı	nsid	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Part 4		Identify Legal Actions, Repossession	Famania				
[■ Y Case Case	ves. Fill in the details. etitle number E Finance v. Riley R 00010 (Will County)	Nature of the case auto repossession	Court or agency Circuit Court o Joliet, IL 60432	of Will County	Status of the Pending On appear Conclude wages cure garnished	eal led rrently being
_	heck	n 1 year before you filed for bankrupto all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attache	d, seized, or levied?
(Cred	itor Name and Address	Describe the Property		Date)	Value of the
			Explain what happene	ed			property
	ccou ■ N	n 90 days before you filed for bankrup ints or refuse to make a payment beca lo Yes. Fill in the details.		cluding a bank or fi	nancial institutio	n, set off any a	amounts from your
(itor Name and Address	Describe the action th	e creditor took	Date	action was	Amount
					take	n	

■ No □ Yes

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

court-appointed receiver, a custodian, or another official?

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Pa	rt 5: List Certain Gifts and Contributions	s			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses				
15.	or gambling? ■ No □ Yes. Fill in the details.	•	r since you filed for bankruptcy, did you lose anyt		
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers	;			
16.	consulted about seeking bankruptcy or p	repari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		erty to anyone you
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Green Path, Inc 38505 Country Club Drive suite 210 Farmington, MI 48331		funds paid for pre-filing counseling		\$25.00
	Scheinbaum & West, LLC P.O. Box 5009 Vernon Hills, IL 60061-5009		\$335 paid for filing fees and \$500 paid for bankruptcy fees.		\$835.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	erty to anyone who
	No				
	Yes. Fill in the details.		Daniel and the second of the s	Data	
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Francine M. Riley

 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than protransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property) include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 							
	Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and value of property transferred	of	Describe any payments reception paid in excharge	eived or debts	Date transfer was made	
	Person's relationship to you						
	junk yard	2004 Saturn Vue not running. scrapped for received \$100.	or junk.				
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect No		perty to a sel	f-settled trust o	r similar device of	which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and value of	of the proper	ty transferred		Date Transfer was made	
Pai	tt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxe	s, and Stora	ge Units			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.						
			of account rument	or Date ad closed moved transfe	, or	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bank	ruptcy, any s	safe deposit box	or other deposito	ory for securities,	
	■ No □ Yes. Fill in the details.						
		14 (1)	*** B			5 4111	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to Address (Number, Street, Ci State and ZIP Code)		escribe the cont	ents	Do you still have it?	
22.	Have you stored property in a storage unit or pl	ace other than your home	within 1 yea	ar before you fil	ed for bankruptcy	?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had ac to it? Address (Number, Street, Ci State and ZIP Code)		escribe the cont	ents	Do you still have it?	
Pai	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that someofor someone.	one else owns? Include an	y property y	ou borrowed fr	om, are storing fo	r, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and		escribe the prop	erty	Value	
		Code)					

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Case number (if known) Document

Debtor 1 Francine M. Riley

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

	, ,	,				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	• • • • • • • • • • • • • • • • • • • •			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.					
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.			
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ronmental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Pai	t 11: Give Details About Your Business or Con	nections to Any Business				
27.	Within 4 years before you filed for bankruptcy, o	lid you own a business or have an	y of the following connections to an	y business?		

Wit	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)				
	☐ A partner in a partnership				
	☐ An officer, director, or managing executive of a corporation				
	☐ An owner of at least 5% of the voting or equity securities of a corporation				
	No. None of the above applies. Go to F	Part 12.			
	Yes. Check all that apply above and fill in the details below for each business.				
Business Name Address		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.		
	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		

Page 42 of 53 Document Debtor 1 Francine M. Riley ase number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Francine M. Riley Signature of Debtor 2 Francine M. Riley Signature of Debtor 1 Date November 18, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Entered 11/18/16 14:45:00

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Doc 1

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	casa:		
Debtor 1	Francine M. Riley			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo		n for Individu	ıals Filing Under	Chapter 7 12/15
If you are an ind	lividual filing under cha	pter 7, you must fill out t	his form if:	
creditors have	e claims secured by yo	our property, or		
You must file th	is form with the court v ever is earlier, unless t		le your bankruptcy petition or l	by the date set for the meeting of creditors, I copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Francine M. Riley	Case number (if know	vn)
proper	otion of ty ng debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Part 2: For any u n the info	List Your Unexpired Personal Proper nexpired personal property lease that prmation below. Do not list real estate	ty Leases you listed in Schedule G: Executory Contracts and Unexpi leases. Unexpired leases are leases that are still in effect; ' ty lease if the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.
Describe	your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's Description	on of leased		□ No
Lessor's i Description Property:	on of leased		□ No
Lessor's Description	on of leased		□ No □ Yes
Lessor's Description	on of leased		□ No
Lessor's i Description Property:	on of leased		□ No
Lessor's i Description Property:	on of leased		□ No
Lessor's i Description Property:	on of leased		□ No
Part 3:		ndicated my intention about any property of my estate that s	
	haity of perjury, I declare that I have in the including the subject to an unexpired lease.	iuicateu iny intention about any property of my estate that s	secures a uebt and any personal
Fra	Francine M. Riley ncine M. Riley ature of Debtor 1	Signature of Debtor 2	
Date	November 18, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-36808 Doc 1 Filed 11/18/16 Entered 11/18/16 14:45:00 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	re Francine M. Riley		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DE	BTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	500.00				
	Prior to the filing of this statement I have received		\$	500.00				
	Balance Due		\$	0.00				
2.	\$335.00 of the filing fee has been paid.							
3.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5.	■ I have not agreed to share the above-disclosed compe	unless they are meml	pers and associates of my law	v firm.				
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				. A			
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 							
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any adv		g service:					
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for	r payment to me for re	epresentation of the debtor(s)	in			
ı	November 18, 2016	/s/ Marc C. Schei	inbaum					
Date		Marc C. Scheinb	aum 6180394					
		Signature of Attorna						
		Scheinbaum & W P. O. Box 5009	vest, LLC					
		Vernon Hills, IL 6	60061-5009					
		915-636-4676						

amerlincat@aol.com

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Francine M. Riley		Case No.			
	•	Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors: 29				
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	rs is true and	correct to the best of my		
Date:	November 18, 2016	/s/ Francine M. Riley Francine M. Riley Signature of Debtor				

Associated Radiologists of Joliet c/o Creditors Collection Bureau Inc P.O. Box 63
Kankakee, IL 60901-0063

Credit One Bank c/o LVNV Funding, LLC P O Box 10497 Greenville, SC 29603

Credit One Bank / Visa P.O. Box 98873 Las Vegas, NV 89193-8873

Credit One Bank / Visa c/o J.C. Christensen P O Box 519 Sauk Rapids, MN 56379

D & E Finance c/o Markoff Law, LLC 29 N. Wacker Dr., # 550 Chicago, IL 60606

EMP of Will County, LLC P O Box 14099 Belfast, ME 04915

Express - Comenity Bank Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125

Illinois Tollway Authority c/o Arnold Scott Harris, PC 111 West Jackson Blvd, suite 600 Chicago, IL 60604-4135

Joliet Radiological Service Corp 36910 Treasury Center Chicago, IL 60694-6900

Joliet Radiological Service Corp c/o ATG Credit, LLC P O Box 14895 Chicago, IL 60614-4895 Kay Jewelers / Sterling Jewelers
375 Ghent Road
Fairlawn, OH 44333-4601

Kay Jewelers / Sterling Jewelers
P.O. Box 3680
Akron, OH 44309

Mr and Mrs Riley Joliet, IL 60435

NELNET 121 S. 13th Street Lincoln, NE 68508

New York & Co / Comenity Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125

Nicor Gas P.O. Box 5407 Carol Stream, IL 60197-5407

Office of the Secretary of State Dept of Administration Hearings Room 212, Howlett Building Springfield, IL 62756

Presence Saint Joseph Medical Cente Patient Financial Services 1643 Lewis Ave., suite 203 Billings, MT 59102-4151

Presence Saint Joseph Medical Cente 333 N. Madison Joliet, IL 60435

Providian / LVNV Funding c/o Financial Recovery Services P O Box 385908 Minneapolis, MN 55438-5908 Safety and Financial Responsibility 2701 South Dirksen Parkway Springfield, IL 62723

Security Finance Company of Illinoi P O Box 3146 Spartanburg, SC 29304-3146

State Farm - Birmingham - auto c/o Vengroff Williams, Inc P O Box 4155 Sarasota, FL 34230-4155

State Farm Insurance Co. / Katchika c/o National Service Bureau, Inc 18912 North Creek Pkwy, # 205 Bothell, WA 98011

Turner Acceptance 5900 W. Howard Street Skokie, IL 60077

Turner Acceptance - 2 c/o J.V.D.B. & Associates P O Box 5718 Elgin, IL 60121-5718

Victoria's Secret - Comenity Bank attn: Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125

World Finance Corporation 108 Frederick Street Greenville, SC 29607-2532

Yatin Shah, MD 2025 S. Chicago Street 60436 Joliet, IL 60436